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ABSTRACT

This report describes activities and accomplishments of the Dual Sensory Impairments Program in Florida, a 3-year federally supported program, housed at Florida State University, to provide technical assistance and other services to students, ages 0 to 21, with deaf-blindness. A change in priorities concerning infants (ages 0 to 2) is noted as the state took on the responsibility for direct services to this age group over the 3 years of the project. The new priority de-emphasized direct service responsibilities and emphasized technical assistance services for all ages (0 to 21). Specific project activities were developed to achieve the following goals: (1) identifying and reporting students (an overall increase of 149 students was reported); (2) increased technical assistance services (including student-specific on-site visits, inservices, workshops, presentations at conferences, other training activities, development of multidisciplinary assessment teams, initiation of a toll-free telephone line for parents, and dissemination of a variety of project-developed materials); and (3) coordination with other agencies and interested groups. (DB)

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ED 391 268

SERVICES FOR STUDENTS WITH DUAL SENSORY IMPAIRMENTS (SSDSI)
Final Report

BACKGROUND

Services for Students with Dual Sensory Impairments (SSDSI), Florida's 307.11 Project, is just completing the third year of a three-year project period, which built on the accomplishments of a previous two-year project with similar goals and expansion of the scope and delivery of service. SSDSI which has been housed at Florida State University will be closed down by the end of the calandar year in 1995 since the federal project was not awarded to the Florida Department of Education, but to a competing applicant.

At the beginning of the three year project in January of1993 the project had separate goals for children ages 0-2 and older students because the state was still in the process of establishing mandated services for children under 3. Initially the project priorities and goals were as follows:

PRIORITY 1-- To insure that direct services are provided to students ages 0-2 with deaf-blindness for whom the state is not mandated to serve, and that technical assistance is available to their families and service providers.

Goals for Priority 1

- Increase the number of students (0-2) identified and reported;
- Provide assessment teams and contracted consultants for expert educational evaluations, functional sensory assessment, and specialized assessments as needed;
- Provide case management assistance to insure that appropriate programs are provided for all reported students (0-2);
- Supplement the existing educational services by expanding the INSITE program at the Florida School for the Deaf and the Blind (FSDB) in a cost sharing activity to increase the number of parent trainers; and
- Increase the orientation and technical assistance services for families and personnel working with students ages 0-2.

PRIORITY 2--to provide technical assistance services as needed for improvement of programming and related services to families and service providers for students ages 3-21 with deaf-blindness, their families and .

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service providers.

Goals for Priority 2

- Increase the number of students (3-21) reported;
- Increase levels (based on intensity of involvement and degree of specificity) of technical assistance services provided for families and service providers for students ages 3-21 to:
  - insure effective education programs;
  - insure provision of specialized training for assessment teams;
  - encourage the replication of successful approaches;
  - provide resources to professionals, paraprofessionals, and parents;
  - facilitate parental involvement; and
  - promote integration in the least restrictive environment.

CHANGE IN PRIORITIES

As the State took on the responsibility for direct services in the 0-2 ages, Priority 1 goals and activities changed accordingly. SSDSI continued to work with the early childhood network to see that students were identified and reported to the census, and also offered technical assistance services to service providers and families of children in those ages in whatever setting their primary services were being provided. This involved working through such agencies as Children's Home Society, Easter Seal Society, United Cerebral Palsy, etc. Technical assistance visits were made to agencies or homes whichever was appropriate.

Priority 1&2 goals for the last two years were combined to de-emphasize direct service responsibilities which had now been taken over by the state and to emphasize technical assistance services for all ages 0-21. Activities for those goals included:

- Increase the number of students 0-21 identified and reported;
- Increase levels (based on intensity of involvement and degree of specificity of technical assistance serviced provided for families and service providers for sgudents ages 0-21;
- Increase coordination activities with appropriate groups, agencies, etc. to improve the information and technical assistance services available for families, professionals, and paraprofessionals;
- Disseminate information and products as appropriate.

SUMMARY OF ACTIVITIES TO COMPLETE GOALS

• IDENTIFYING AND REPORTING STUDENTS

Florida has long been one of the states which significantly under-identifies students with deaf-blindness (Florida uses the term, dual sensory impairments). Over the last three years numerous efforts have been made to find remedies to that problem.

- Packets containing charts of the number of anticipated and currently reported students by county were prepared and distributed along with guidelines for deciding which students to report;
- Workshops were presented upon request for teachers, assessment personnel and district supervisors on how to identify and report students to the census;
- A consultant was brought in from out of state to look at our census procedures and any barriers and to make recommendations for any needed changes;
- Florida staff participated in discussions with other states on the problem and agreed to serve on a committee to seek additional solutions to this wide spread problem (however, subsequent meetings and efforts did not materialize);
- Project staff included a section in the 1993 end of year report which outlined the identified or suspected barriets associated with maintaining an accurate census and a section on strategies to address census problems.

Despite the difficulties encountered over the three years of this project period, there was an overall increase of 149 students identified and reported.

•INCREASED TECHNICAL ASSISTANCE SERVICES

Because of the diversity of the population of students who have dual sensory impairments, the jajority of the technical assistance provided by this project is "student specific", requiring onsite visits (sometimes at both home and school) to discuss concerns and questions of the family and staff and to observe what is currently being done. A written report which includes a summary of the observations and discussions and recommendations for strategies to use to address the concerns and questions which initiated the request for services is prepared and sent to the school or agency with copies to the family.

This student specific approach to technical assistance was

recommended by the project's advisory board. This approach not only acknowledtes the uniquess of the individual student, but also recognizes that members of the local team centered around the individual student have varying degrees of knowledge and expertise which need to be supplemented and complemented in order for them to develop the curriculum and strategies needed by the student.

• Onsite visits

These onsite visits may involve hours or even days of observations in the child's surroundings, demonstrations of techniques, discussions with as many family members and personnel directly involved in the students program as possible and appropriate for the needs of the situation. Some onsite visits include mini-workshops for those involved, some include team planning sessions with family and professionals, and some include individual conferences with the various people involved.

Onsite visits are scheduled at the request of the school or agency and some students recieved only one visit while others received multiple visits during the year according to an ongoing follow-up technical assistance plan as requested by the school or agency.

During the three years of this project period, 172 students received one or more technical assistance visits. In the first year 61 students were visited, in the second year 64, and in the final year 85 students were visited (despite the fact that few visits were made during the 4th quarter when requests were being referred to the new project and the transition in service provision was being made).

• Inservices, Workshops, Presentations at Conferences, and Other Training Activities

SSDSI personnel and contracted consultants were available for workshops, inservices and other training activities upon request (sometimes in coordination with other groups or agencies). Staff also present at state and national conferences as appropriate.

In the first year of this project, staff presented 3 inservices on communication and educational strategies, conducted Phase I and Phase II training for multidisciplinary assessment teams, supervised practicum assessments for 3 trained teams, and made 3 presentations at a parent workshop. Approximate number of participants for these events was 70.

In the second year of this project, staff presented: 4 inservices on communication, 1 on general information about dual sensory impairments, 3 presentations at 2 different parent conferences, 1 presentation at the

State CEC conference, several presentations at a national seminar on van Dijk strategies, taught part of the Alabama Summer Institute, and made a talk to one class at FSU. About 280 participants were involved.

During the third year of this project, staff or contracted consultants presented: 4 inservices on educational strategies, 2 presentations at a parent conference, 3 presentations at the annual CARD conference, and helped teach the Summer Institute on Deaf-Blindness for a 10 state region in association with Perkins. About 358 participants were involved.

• Multidisciplinary assessment teams

One of the ideas developed by the advisory board was to establish a pool of expertise which could be used to provide indepth observations over a 3 day onsite visit by a multidisciplinary team consisting of a psychologist, an educational diagnostician, a sensory specialist and a consulting parent. Training materials were developed and team members were trained in two phases. Phase I training was completed for the first group of team members prior to the beginning of this project period. Phase I was repeated for another group in the first year of this project period and was followed up by Phase II for all 16 team members who had been through the first part of the training. Following those two training activities, trainees who the trainers considered appropriate to use as contracted consultants for SSDSI then participated in a supervised practicum assessment and were then available for unsupervised assessment assignments as the need arose. While there seemed to be a great deal of excitement at numerous levels across the state about this concept, in actual practice the requests for this service were very disappointing.

In the first year of the project there were 3 practicum assessments completed, in the second year of the project there were two practicum assessments completed, in the final year of the project 2 assessments were requested and completed by fully trained team members.

• 800 Phone Line

SSDSI initiated the use of an 800 phone line to provide more easy access for parents. The phone line not only allowed parents to request services and ask for information on specific topics, but it also gave them an opportunity to discuss their child's progress or current difficulties with someone who could provide an understanding ear. The 800 line was so successful that we began giving the number to teachers and paraprofessionals who were often unable to make long distance calls from

their school sites.

• Dissemination of information

SSDSI disseminated a variety of information including: information about the project and services; forms and instructions for reporting to the census; information about specific aspects of dual sensory impairments or strategies to deal with certain difficulties; information from state and national coalitions; information about upcoming conferences, seminars or workshops; multidisciplinary team assessment training manuals; and issues of the SSDSI newsletters on sleep disorders, and behaviors.

• COORDINATION WITH OTHER AGENCIES AND INTERESTED GROUPS

During the three years of the project, SSDSI engaged in a number of activities in coordination with other groups or agencies including:

• Assistance with developing state guidelines for competencies for teachers who will be seeking an endorsement in dual sensory impairments;

• Expanding the emphasis of the annual CARD conference to include dual sensory impairments through provision of speakers for the 2nd annual conference and assistance with planning the conference, and disseminating information about the conference to the parents of students with dual sensory impairments;

• Attending meetings of the Developmental Disabilities Council, the CARD group, TRACES, 307.11 directors, etc.

• Providing speakers for the annual FSDB parent conference, and other conferences, seminars, and training events in conjunction with CEC, other 307.11 projects, Perkins Institute, FSU, etc.

As the responsibilities for providing technical assistance services for Florida's students with deaf-blindness is being transferred from SSDSI to the new project in Gainesville there were a number of activities involved in make the transition and closing down SSDSI including:

• All advisory board members, multidisciplinary assessment team members, contact people, and parents were notified about the upcoming changes;

• Several meetings were held with various people (including Carol Allman, Donna Williams, Bill Wharton-project evaluator, and Anita Briggs) to plan a smooth transition;

• Names of contacts in each district for students currently receiving TA services were provided to the new project and to the appropriate

regional CARD center;

- In the last quarter, those requesting services were referred to the new project;
- Census information was transferred;
- Extra copies of reports and information about individual students were shredded;
- Records, materials, and equipment were appropriately transferred or reassigned;
- Video tapes of individual students were returned to the school or family.

Submitted by:

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